

## **BOARD OF REGISTERED NURSING**

P.O. BOX 944210, SACRAMENTO, CA 94244-2100 TDD (916) 322-1700 TELEPHONE (916) 322-3350



Ruth Ann Terry, MPH, RN Executive Officer

## UNLICENSED ASSISTIVE PERSONNEL ACUTE CARE

Effective January 1, 2000.

The BRN 1994 advisory statement on Unlicensed Assistive Personnel (UAPs) gave guidance to RNs when having to make clinical decisions to assign a nursing task to unlicensed assistive personnel. In addition to the Boards' advisory statement on UAPs a new section was added to the Nursing Practice Act.

Governor Gray Davis signed AB 394 Kuehl, Chaptered 945, into law on October 10, 1999 adding Section 2725.3 to the Business and Professions Code( B&P) Nursing Practice Act. The law states that health care services are becoming more complex and it is increasingly difficult for patients to access integrated services. The quality of patient care is jeopardized because of staffing changes implemented in response to managed care. To ensure the adequate protection of patients in acute care hospitals, it is essential that qualified registered nurses and other licensed nurses be accessible and available to meet the needs of patients. The basic principles of staffing acute care settings should be based on the patients care needs, the severity of conditions, the services needed, and the complexity surrounding those services.

The new law adding B&P Section 2725.3 prohibits a general acute care hospital, a acute psychiatric hospital, and specialty hospitals from assigning an unlicensed person to perform nursing functions in lieu of the registered nurse, and does not allow unlicensed personnel to perform procedures under the direct clinical supervision of a registered nurse that require a substantial amount of scientific knowledge and technical skills, including but not limited to, any of the following:

- (1) Administration of medication.
- (2) Venipuncture or intravenous therapy.
- (3) Parenteral or tube feedings.
- (4) Invasive procedures including inserting nasogastric tubes, inserting catheters, or tracheal suctioning.
- (5) Assessment of patient condition.
- (6) Educating patients and their families concerning the patient's health care problems, including post discharge care.
- (7) Moderate complexity laboratory tests.
- (b) This section shall not preclude any person from performing any act or function that he or she is authorized to perform pursuant to Division 2 (commencing with Section 500) or pursuant to existing statute or regulation as of July 1, 1999.

**BOARD APPROVED 2/00** 

1